

# AIDS Brief

for professionals

## Social Workers



The HIV/AIDS epidemic is having a major impact at all levels of society, from the individual to the macro-economic. At the micro-level the impact is particularly devastating, not only for the individual who is infected, but also for his or her family and the wider community. Traditional methods of care and support are put under tremendous pressure as families lose their capacity to cope. Social workers are at the forefront of the battle to provide effective care, counselling and support to those affected, and to develop new interventions to prevent the spread of infection. This AIDS Brief looks at the implications of HIV/AIDS for social workers and at the types of responses which are required by practitioners and managers.

### BACKGROUND

**Definition:** Social workers are employed within a diverse range of government and non-governmental organisations. The term 'social worker' in this AIDS Brief is intended to include professionals with titles such as community worker, child care worker, youth worker, residential care worker as well as social worker.



In every society there have always been individuals or organisations who have assisted and supported the vulnerable and needy within their community. In many societies the extended family has traditionally acted as the main source of support, sometimes aided by religious organisations. Social work as a profession developed and expanded during the 20<sup>th</sup> century due to the rise

of state welfare provision. State funded social work tends to be more prevalent in affluent, Western countries, but many social workers world-wide may be found in the non-formal sector, employed by NGOs, community organisations and civil or religious organisations. Social workers advise, support and assist vulnerable individuals such as children, the sick and disabled and the elderly. They also seek to support families, and

work with groups and communities. Social work interventions include attempts to prevent problems through tackling the causes of social need, such as poverty, as well as the provision of care, counselling and support to those affected. Social workers in many countries are therefore at the forefront of attempts to promote social development and to find sustainable ways of uplifting communities.

## KEY ELEMENTS

No single organisation or individual social worker is likely to be in the position of implementing all of the strategies detailed below. The more severe the epidemic, the more pressure there will be on the 'welfare' sector. Social workers therefore must define clearly the limits of their role and co-ordinate their efforts with professionals working in other fields, such as health and education.

### Poverty, gender and HIV/AIDS

Poverty is a major factor in the transmission of HIV infection, but the epidemic itself also contributes to poverty. Infection in one member of a household has wide repercussions, since many of those infected are young adults who are breadwinners. Families affected by HIV/AIDS may sink into permanent poverty as the infected person becomes progressively sick and unable to work. The costs of medicines, hospital care, and successive funerals drain a household's depleted resources.

HIV/AIDS affects women in three ways, as individuals, as mothers and as caregivers. AIDS patients are often cared for at home by female relatives. This leaves less time for them to provide care for children and to engage in productive activities. Children (especially girls) may be required to take on extra household responsibilities, or to find work outside the home to boost family income. Children may drop out of school as household finances tighten. Women who are widowed may lose their rights to inherit property and be made homeless.

#### *The social worker's role:*

- Identify, strengthen and support existing positive community responses to the epidemic.
- Target assistance to the most needy communities in ways that avoid stigmatising AIDS-affected households.
- Link families with income-generating projects and vocational training programmes.

- Identify sources of financial and material assistance and encourage community fundraising.
- Lobby for the protection of women's and children's inheritance and property rights.
- Promote measures that enable children to stay in school (e.g. schemes for parents to provide labour to upgrade the school in lieu of school fees, or the abolition of school uniforms).

### Assisting HIV positive individuals and people living with AIDS (PWAs)

Individuals who are HIV positive experience many emotions including shock, denial, depression, guilt and anger. Many are isolated and afraid to share the knowledge of their status with anyone, including their partner(s), so they do not



take preventative measures to avoid transmission of the virus. Those who disclose may suffer discrimination in the community and the workplace. Many are afraid of what will happen to their children when they die, but feel powerless to plan for this eventuality. Health care for infected people and PWAs in developing countries is often inadequate. Drugs that can improve longevity and quality of life, such as AZT, are typically unaffordable. Home-based care schemes enable PWAs to remain in familiar surroundings, but households may lack access to clean water and sanitation and be unable to afford basic medicines to treat infections. Caregivers may not have the skills or resources necessary to provide adequate palliative care, and risk suffering from burnout.

#### *The social worker's role:*

- Promote easily accessible pre- and post-HIV test counselling and adequate follow-up systems.
- Encourage and enable people infected with HIV to disclose to their partner(s) and close family.
- Assist parents to plan for the future care of their children.
- Link people with local support services such as drop-in centres, mobile clinics, shelters and hospices.
- Establish and strengthen self-support groups and networks.
- Train and support relative and volunteer caregivers.
- Establish self-support groups for PWAs. Mobilise and train them as AIDS educators/volunteers.
- Raise awareness in communities about the rights of PWAs not to suffer discrimination.
- Lobby government to improve access to basic infrastructure eg access to safe water and adequate health services.

### Supporting HIV positive children

Without medical intervention, approximately a third of babies born to women with HIV infection are themselves infected with HIV. Mothers who do not breastfeed can reduce the risk of passing on the virus to their child. Older children can become HIV positive following sexual abuse. Children on the street are particularly vulnerable to HIV infection. Children who are HIV positive need to have their immune systems bolstered through protection from opportunistic infections and adequate nutrition, but their parents may be too poor or too sick to provide this. Children who are HIV positive may suffer discrimination at crèches, schools and in the community. Relatives may reject orphaned children who are HIV positive. It can be particularly difficult to find foster/adoptive carers for HIV positive children and some children's homes may discriminate against them.



### **The social worker's role:**

- Establish policies regarding HIV testing of children.
- Provide age-appropriate counselling to children who are dying, and bereavement counselling to parents who have lost a child.
- Provide sexual abuse counselling where appropriate.
- Promote the development of policies that establish the right of HIV positive children not to suffer discrimination by crèches, schools etc.
- Develop special foster/adoptive schemes for HIV positive children.

### **Supporting children living in HIV/AIDS-affected households and orphans**

Children in HIV/AIDS-affected households experience psychological trauma long before they are orphaned. They are often expected to perform adult roles at a young age and provide care for a sick parent, which can create long-term emotional problems. Children may be sent to live with relatives far from the area they know. Orphans face a higher risk of morbidity, mortality and poor nutrition than non-orphans do. They may be neglected by caregivers or be left on



their own to form child-headed households. Girls may be forced into early marriages. Both girls and boys risk being abused, exploited, and may end up living on the street, increasing their risk of HIV infection. The need for orphans to grieve is frequently overlooked.

### **The social worker's role:**

- Develop systems to enumerate and assess the needs of children living in communities badly affected by HIV/AIDS.
- Encourage and equip community

members to develop visiting programmes to monitor and support HIV/AIDS-affected children in ways that will not stigmatise them.

- Identify and support child-headed households.
- Assist children and families to create 'memory boxes' containing mementos of a dying parent.
- Prepare men to adopt new caring roles.
- Organise children's groups and recreational activities for youth.
- Monitor street children and intervene rapidly with new arrivals on the street to determine whether there is a relative who might act as caregiver.
- Use community work methods to recruit foster/adoptive carers and enable children to remain in their community of origin. Streamline procedures in order to process substitute carers swiftly.

### **Addressing the needs of the elderly**

Increasing mortality among adults of the 'middle' generation means that older people are left without the support of their children. The elderly (especially women) may not only often have to provide care for a sick family member, but also may have to take on responsibility for orphaned children. These extra responsibilities may drain their physical, psychological and/or financial resources.

### **The social worker's role:**

- Establish support networks, eg nutrition centres, crèches or co-operative daycare.
- Provide practical support and mobilise financial and material resources.
- Ensure that caregivers are in receipt of any grants for which they are eligible.
- Provide bereavement counselling.
- Help caregivers to understand the psycho-social needs of orphaned children.

### **Working with youth**

All young people are vulnerable to HIV infection, but some (such as sex workers, drug users, street youth and domestic workers) are especially vulnerable. Good

quality prevention programmes can delay first sexual intercourse, prevent unwanted pregnancies and reduce HIV infection. For prevention and support programmes to be effective, the strengths of young people must be recognised and their participation mobilised. Young people should be involved at all stages of planning and implementing programmes. Information about HIV/AIDS is not enough: young people need to develop social and life-skills that give them protection from infection and they need to have access to good quality, confidential welfare and health services. Gender issues have a critical impact on HIV/AIDS. It is not sufficient to give assertiveness skills to



young women who may have little or no power to negotiate safe sex. It is crucial also to tackle young men's attitudes about sex and masculinity.

### **The social worker's role:**

- Devise HIV prevention programmes that involve youth at all stages.
- Mobilise and train young people as peer educators.
- Promote life-skills programmes that emphasise survival skills (e.g. health, nutrition and negotiating skills) and which prepare adolescents to adopt adult roles.
- Assist parents and other adults in contact with youth to develop greater openness about sex.
- Help to dispel myths about HIV/AIDS and promote attitudes that will ensure that youth living with HIV are not subjected to discrimination within families and communities.

## CHECKLIST

- ✓ Does the organisation I work for have a policy that addresses human rights issues in respect of staff and service users infected and affected by HIV/AIDS?
- ✓ Have I received adequate training about HIV/AIDS?
- ✓ Do I have sufficient information about the number of HIV/AIDS-affected individuals in the locality where I work and about their needs?
- ✓ Do I know what steps community members have already taken to provide support for persons affected by HIV/AIDS?
- ✓ Has there been sufficient user involvement in devising prevention and support programmes?
- ✓ Can I provide a better service by co-ordinating and sharing resources with other organisations?



## SUMMARY

Social workers world-wide are likely to be faced with the need to assist individuals, families and communities affected by HIV/AIDS, but especially in countries where infection rates are high. Social workers are also well placed to develop and implement prevention strategies. The social

impact of the disease is very wide ranging, and needs will vary according to the context in which social workers are operating. Social workers may well feel overwhelmed by the scale of the problems which they encounter, but each individual can play their part by informing themselves about the

particular impact which HIV/AIDS is having on the individuals and community within which they are working and by developing appropriate strategies. Social workers will also be more effective if they lobby for a co-ordinated response with other sectors, such as health, education and business.

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